



JPW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Re. Appln: Steven S. Bordewick et al.  
Serial No.: 10/643,642  
Filed: August 19, 2003  
For: FACE MASK SUPPORT  
Examiner: Teena Kay Mitchell  
Attorney: Kevin W. Cyr  
Attorney Docket No.: 1061-003

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

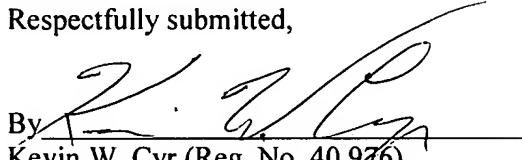
**TRANSMITTAL COVER LETTER**

Sir:

Enclosed for filing are the following:

1. This Transmittal Cover Letter;
2. Transmittal Form;
3. Revocation of Power of Attorney with New Power of Attorney  
And Change of Correspondence Address;
4. Statement Under 37 C.F.R. 3.73(b); and
5. Return Postcard.

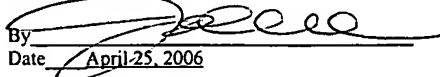
Respectfully submitted,

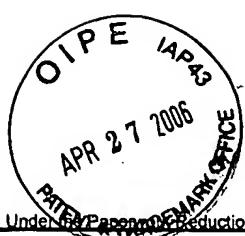
By   
Kevin W. Cyr (Reg. No. 40,976)  
Attorney for Applicant  
Kondzella & Cyr, P.A.  
Pondview Plaza, Suite 114  
5850 Opus Parkway  
Minnetonka, MN 55343  
Telephone: (952) 545-8755

Dated: April 25, 2006

**CERTIFICATE OF MAILING**

I hereby certify under 37 C.F.R. Section 1.8 that this document, as well as the above-identified documents, are being deposited with the United States Postal Service as First Class Mail, in an envelope addressed to, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the dated indicated below.

By   
Date April 25, 2006



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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

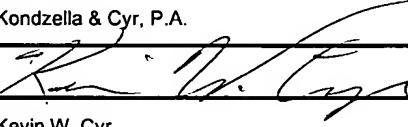
Total Number of Pages in This Submission

|                        |                            |
|------------------------|----------------------------|
| Application Number     | 10/643,642                 |
| Filing Date            | August 19, 2003            |
| First Named Inventor   | Steven S. Bordewick et al. |
| Art Unit               | 3743                       |
| Examiner Name          | Mitchell, Tenna Kay        |
| Attorney Docket Number | 1061-003                   |

### ENCLOSURES (Check all that apply)

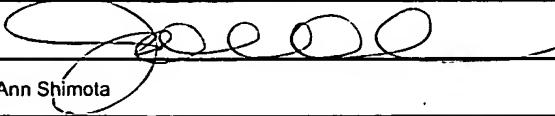
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|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached                                                                                  | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br><input type="checkbox"/> Statement Under 37 CFR 3.73(b); and Return Postcard. |
| <input type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)                                  | <input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br><input checked="" type="checkbox"/> Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | Remarks                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement |                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> Certified Copy of Priority Document(s)                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|              |                                                                                     |          |        |
|--------------|-------------------------------------------------------------------------------------|----------|--------|
| Firm Name    | Kondzella & Cyr, P.A.                                                               |          |        |
| Signature    |  |          |        |
| Printed name | Kevin W. Cyr                                                                        |          |        |
| Date         | April 25, 2006                                                                      | Reg. No. | 40,976 |

### CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

|                       |                                                                                     |      |                |
|-----------------------|-------------------------------------------------------------------------------------|------|----------------|
| Signature             |  |      |                |
| Typed or printed name | JoAnn Shimota                                                                       | Date | April 25, 2006 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/82 (01-06)

Approved for use through 12/31/2008. OMB 0651-0035  
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**REVOCATION OF POWER OF  
ATTORNEY WITH  
NEW POWER OF ATTORNEY  
AND  
CHANGE OF CORRESPONDENCE ADDRESS**

|                        |                            |
|------------------------|----------------------------|
| Application Number     | 10/643,642                 |
| Filing Date            | August 19, 2003            |
| First Named Inventor   | Steven S. Bordewick et al. |
| Art Unit               | 3743                       |
| Examiner Name          | Mitchell, Teena Kay        |
| Attorney Docket Number | 1061-003                   |

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

**OR**

I hereby appoint the practitioners associated with the Customer Number: 00044163

Please change the correspondence address for the above-identified application to:

The address associated with Customer Number: 00044163

**OR**

|                                                  |                                                |          |                  |
|--------------------------------------------------|------------------------------------------------|----------|------------------|
| <input type="checkbox"/> Firm or Individual Name | Kevin W. Cyr                                   |          |                  |
| Address                                          | Pondview Plaza<br>5850 Opus Parkway, Suite 114 |          |                  |
| City                                             | Minnetonka                                     | State MN | Zip 55343        |
| Country                                          | United States of America                       |          |                  |
| Telephone                                        | 952-545-8755                                   | Email    | kcyr@kciplaw.com |

I am the:

Applicant/Inventor.  
 Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

|           |                                                                                     |           |  |
|-----------|-------------------------------------------------------------------------------------|-----------|--|
| Signature |  |           |  |
| Name      | Charles Lehman, Vice President of Operations                                        |           |  |
| Date      | 9-29-2006                                                                           | Telephone |  |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

\*Total of \_\_\_\_\_ forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**STATEMENT UNDER 37 CFR 3.73(b)**

Applicant/Patent Owner: Steven S. Bordewick et al.

Application No./Patent No.: 6,854,465 Filed/Issue Date: February 15, 2005

Entitled: **FACE MASK SUPPORT**

AEIOMed, Inc. , a Corporation  
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1.  the assignee of the entire right, title, and interest; or
2.  an assignee of less than the entire right, title and interest  
(The extent (by percentage) of its ownership interest is \_\_\_\_\_ %)

in the patent application/patent identified above by virtue of either:

A.  An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 015548, Frame 0709, or for which a copy thereof is attached.

OR

B.  A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as follows:

1. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.
2. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.
3. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

Additional documents in the chain of title are listed on a supplemental sheet.

As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11.

[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, to record the assignment in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Charles Lehman

4-24-2006

Signature

Charles Lehman

Date

Printed or Typed Name

Telephone Number

Vice President of Operations

Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: **Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450**.

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